FEC FORM 1

## STATEMENT OF ORGANIZATION

<b>FORM</b>	1	OH	GANIZA	HO	N				
	•		(See instructions	s)			Office use	only	
1. NAME OF COMMITTE	EE (in full)		neck if name changed)	Exar over	nple: If typying, type the lines	12FE4N	15		
DISTRIC	ZA TTWIS	EU YOLUNTA	RY POLITICAL	ACTIO	ON FUND				ш
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ADDRESS (numl	per and street)	PO BOX	( 66 						ш
(Check if a				11					
is changed	d)	DANIA BEACH					33	004   00	066
			(	CITY		STATE		ZIP CODE 📥	
COMMITTEE'S	E-MAIL ADDF		ovide only one e-m		ess)				
(Check if a		smills@	amo-union.or	g					
io onango	-,								لبب
COMMITTEE'S	WEB PAGE A	ADDRESS (URL)							
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is changed									
2. DATE	<b>0</b> , <b>7</b>	18 / Y Y	0 1 1 Y						
3. FEC IDENTIFICATION NUMBER C C00342105									
4. IS THIS ST	ATEMENT	NEW (N	) <b>OR</b>	Х	AMENDED (A)				
			, -		( )				
I certify that I have	e examined this	Statement and to t	ne best of my know	ledge an	d belief it is true, correct a	and complete			
		loo	k Branthover						
Type or Print Na	me of Treasur	er <u>Jac</u>	K Brantilover						
Signature of Tre	asurer El <u>ec</u>	tronically Filed by	Jack Brant	hover		Date 0	) <b>7</b> / D	18 / Y Y	2 0 1 1
NOTE: Submission	on of false, error				ne person signing this Sta			.S.C. §437g.	
Office Use Only					For further information Federal Election Commis Toll Free 800-424-9530 Local 202-694-1100			C FORM vised 02/2009)	